



DORKING AND HORLEY RURAL DISTRICT

ANNUAL REPORTS

of the

MEDICAL OFFICER OF HEALTH

and of

THE CHIEF PUBLIC HEALTH INSPECTOR

1956

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Public Health Department,
West Hill House,
West Hill,
EPSOM,
Surrey.

December, 1957.

To the Chairman and Members of the
Dorking and Horley Rural District Council

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit an Annual Report for the year 1956, which has been prepared in accordance with the requirements outlined in Circular 19/56 of the Ministry of Health.

The nature of the report requires the inclusion of a considerable amount of statistical matter. At the same time, an endeavour has again been made to indicate briefly the health services administered not only by the Rural District Council, but also by the Surrey County Council as the local health authority for the area. As these vary little from year to year, repetition has been inevitable.

With one exception the vital statistics for the year are satisfactory, showing a rise in the birth rate and a fall in the death rate. The exception is the continued high rate of deaths from road accidents. This matter is covered in the report under the section dealing with the causes of death.

In connection with sewerage it is possible to report, with great satisfaction, the completion of the main drainage scheme for Abinger Hammer and the commencement of work on the Charlwood scheme.

The incidence of infectious disease was low, and there was no epidemic which calls for special mention.

The proportion of children receiving the treatments now available for the prevention of several of the infectious diseases reached a satisfactory level, and reflects credit on parents, the medical practitioner service and the divisional health service.

The latest addition to the list of immunising procedures is vaccination against poliomyelitis, on which hopes rest as an effective counter to infection from this dangerous virus. Because of the shortage of material, a slow start has been inevitable in this new campaign. The organisation is available to deal with larger numbers of children as soon as the distribution of the vaccine is increased.

I wish to remind the Council of the very meritorious work performed by all members of the staff of the Public Health Department, whether engaged on technical duties or in clerical and office work.

I take this opportunity of expressing my thanks to the Council, and particularly to the Chairman and Members of the Public Health Committee, for their continued support.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

CYRUS IVE.

Medical Officer of Health.

PUBLIC HEALTH AND HOUSING COMMITTEE 1956-57

Mr. A. Farley

Major-Gen. E. H. Goulburn

Col. T. R. B. Sanders, C.B.

Mr. G. J. Stack

Mrs. R. Sewill

Chairman of Committee

Mrs. P. J. M. Catterall

Mr. P. S. Henman

Mr. T. Jones

Mr. G. W. B. Palmer, C.C.

Mr. W. A. Searle

Mr. F. A. Woodruff

Vice-Chairman of Committee

Mr. V. S. Wood, J.P.

Mr. H. T. Whittingham

Group-Capt. F. Whitworth

Ex-Officio Members

Mr. G. H. Sharp

Chairman of Council

Mr. V. H. Deuchar

Vice-Chairman of Council

Representatives of the Council on

(1) SOUTHERN DIVISIONAL (HEALTH) SUB-COMMITTEE

Mrs. I. Carr

Mrs. E. D. Hill

Mr. G. R. Horley

Mr. H. T. Whittingham

(2) TUBERCULOSIS CARE COMMITTEE

Mr. G. R. Horley

(Dorking Care Committee)

Mrs. E. D. Hill

(Reigate Care Committee)

DORKING AND HORLEY RURAL DISTRICT

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

Cyrus Ive, M.B.,(Lond.), M.R.C.S.,(Eng.), L.R.C.P.,(Lond.), D.P.H.

Chief Public Health Inspector

and

Housing Officer

Eric A. Atkinson

M.R.P.H.I., M.P.H.I.A.

Additional Public Health Inspectors

D. D. Heath

M.R.S.H., M.A.P.H.I.

R. R. Charman

M.R.S.H., M.A.P.H.I.

Medical Officer of Health's Staff

Clerk/Secretary

Miss E. E. Nolan

Clerk/Telephonist

Mrs. M. E. Joseph

Junior Clerk

Miss M. Chalker (resigned
31.8.56)

Miss M. Richardson (appointed
17.9.56)

Chief Public Health Inspector's Clerical Staff

Shorthand/Typists

Miss E. M. Knight

Miss A. E. Grinstead

Pests Officer

W. J. Woodards

The Medical Officer of Health and his clerical staff act in a similar capacity for the Dorking and Leatherhead Urban Districts and for the Borough of Epsom and Ewell.



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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

FOR

THE YEAR 1956

1. STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (acres)	...	...	...	...	53,943
Population (Census 1951)	...	...	...	...	25,832
Population (Estimated mid-year 1956)			...	...	28,350
Density (persons per acre)		...	...	...	0.53
Rateable value at 31st December, 1956			...	...	£423,599
Sum represented by a penny rate	...	...	...	...	£1,650

PARISHES COMPRISING THE DISTRICT WITH AREA & POPULATION (Census 1951)

Parish	Population (1951)	Area (acres)	No. of Houses Dec. 1956.
Abinger	1,889	7,481	614
Betchworth	1,614	2,562	499
Buckland	640	1,362	205
Capel	2,386	5,694	786
Charlwood	2,757	6,901	831
Headley	591	1,640	168
Holmwood	1,084	3,749	338
Horley	11,394	7,449	4,051
Leigh	820	3,419	278
Newdigate	1,220	4,744	425
Ockley	798	3,400	275
Wotton	639	5,542	211
	25,832	53,943	8,681

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR

<u>Live Births</u>		<u>Total</u>	<u>Male</u>	<u>Female</u>	
Total		451	237	214	Birth rate per
Legitimate		435	231	204	1,000 population 15.9
Illegitimate		16	6	10	
					Standardised
					Birth Rate 16.9
<u>Still Births</u>					
Total		6	1	5	Rate per 1,000
Legitimate		6	1	5	total live and
Illegitimate		-	-	-	still births 13.1
					Rate per 1,000
					population 0.21
<u>Deaths</u>		268	143	125	Crude Death Rate 9.5
					Standardised
					Death Rate 9.2
<u>Deaths of Infants under 1 year of age</u>					
Total		9	6	3	Infant Mortality
Legitimate		9	6	3	Rate per 1,000
Illegitimate		-	-	-	live births 20.0
<u>Deaths of Infants under 1 month of age</u>					
Total		4	3	1	Neonatal Mortality
Legitimate		4	3	1	Rate per 1,000
Illegitimate		-	-	-	live births 8.9
<u>Maternal Mortality</u>					
Maternal causes (excluding abortion)					Maternal Mortality
Due to abortion					Rate per 1,000 births
					(live & still) -

Table I shows birth and death rates, and case rates for infectious diseases, with comparison with the figures for 1955.

Table II gives a comparison of birth death and infant mortality rates for the district since 1931, with the figures for England and Wales for the same period.

BIRTHS

Live births numbered 451 of which 237 were males and 214 females, representing a birth-rate of 15.9 per 1,000 of the population, compared with the rate of 15.7 for England and Wales. A comparability factor (1.06) has been supplied by the Registrar-General, allowing for the differing age and sex distribution of the population in different areas, for use when comparing the local rate with those of other districts. When applied, a standardised rate of 16.9 is obtained.

Births (cont.)

Sixteen births, or 3.5% of the total, were illegitimate. The corresponding figure for England and Wales was over 4%. There were no deaths of illegitimate infants.

DEATHS

Deaths assigned to the area numbered 268, representing a crude death-rate of 9.5 per 1,000 of the estimated population. The total comprised 143 males and 125 females.

A comparability factor (0.97) has been provided by the Registrar-General which may be applied to the crude death-rate for use in comparing the local death-rate with those of other areas. The factor makes allowance for the differing age and sex distributions of local populations. Application of the factor to the local rate reduces it from 9.5 to 9.2. The death-rate for England and Wales was 11.7.

Approximately 50% of deaths took place in hospitals.

The causes of death are set out in Table III. Heart disease, diseases of the circulatory system and cancer were again the most frequent causes of death in the older age group.

The average age at death of males was 64.2 years and of females 71.2 years.

Road Accidents

In the annual report of 1954 it was noted that there were 5 deaths from road accidents, and that this was the highest figure recorded since the period 1940 to 1942, when traffic was operating under wartime blackout conditions. In the report for 1955 attention was called to the fact that there were 6 deaths; that the road accident death-rate was more than double the national figure, and that traffic conditions in Horley appeared to be highly dangerous.

In 1956 deaths of residents due to accidents involving motor vehicles again numbered 6. Four of the deceased were residents of Horley, 1 of Charlwood and 1 of Leigh. Five of the deaths resulted from local accidents. The figures do not include the deaths of any non-residents which may have resulted from accidents within the Rural District.

At the time of the accidents 2 of the deceased were walking, 2 were riding pedal cycles, 1 was riding a motor cycle and 1 was the occupant of a motor car. Their ages were 8, 9, 26, 44, 49 and 84 years.

Deaths due to road accidents constituted 2.2% of all deaths in the Rural District. If the Parish of Horley is considered alone the figure was 3.3%. The corresponding figure for the administrative county of Surrey was 0.9%.

The high incidence of deaths from road accidents of boys in the age group 5 to 14 years is particularly lamentable. In the period 1955-56 four boys have been killed; this total accounts for approximately 1/5th of similar deaths in the whole of the county of Surrey, which has a population fifty times greater than the Rural District.

By the formation of a Road Safety Committee an important move has been made which should result in a more comprehensive investigation of the cause of this high incidence of fatal road accidents, and from this may result some remedial measures. The Committee includes six members of the Council and representatives from various interested organisations.

INFANT MORTALITY

Deaths of children under the age of one year numbered 9 and the infant mortality rate was 20.0 per 1,000 live births. Comparable figures for 1955 were 10 deaths and an infant mortality rate of 24.3. The rate for England and Wales was 23.8.

Four of the deaths occurred within one month of birth, 3 being due to prematurity and 1 to a congenital defect. The deaths in children over 1 month were caused by congenital defects in 3 cases, pneumonia in 1 case and accidental asphyxiation in his cot in the final case.

MATERNAL MORTALITY

No death connected with pregnancy was recorded during the year. The maternal mortality rate for England and Wales was 0.56 per 1,000 births.

POPULATION

The Registrar-General's estimate of population of 28,350 showed an increase of 580 on the previous year. Part of this was due to a natural increase, excess of births over deaths being 183. The remainder of the increase was accounted for by immigration.

The population of the district is estimated to have increased by 2,518 since the Census was taken in 1951. Most of this growth has taken place in the Parish of Horley, with small increases in the Parishes of Abinger, Betchworth and Capel. A decrease of population has occurred in the Parish of Charlwood as a result of the development of Gatwick Airport.

2. GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

LABORATORY FACILITIES

Laboratories available to medical practitioners are provided at the East Surrey and St. John's Hospitals, Redhill and at St. Luke's Hospital, Guildford. Examination of specimens in connection with the diagnosis and treatment of infectious diseases can be referred to either of two Public Health Laboratories of the Medical Research Council, one situated at West Hill House, West Hill, Epsom and the other at St. Luke's Hospital, Guildford. These laboratories also undertake bacteriological examinations of samples of water supplies, milk and food, including ice-cream and biological examinations for tubercle bacilli in milk.

AMBULANCE SERVICE

The public ambulance service is under the control of the Surrey County Council, who have given the following information regarding the use of the service:-

The main ambulance station for the area is at the Smallfields Section of the Redhill County Hospital (Telephone Smallfields 271) with a sub-station at Harrowlands, South Terrace, Dorking.

In accidents in the home or elsewhere or in any sudden illness in the streets or public places, any responsible person may call the ambulance to remove the patient (if by telephone use the local Emergency Calling System). Normal maternity cases are removed if the applicant can give evidence that a maternity bed has been booked. Maternity cases with serious complications, or where the birth is imminent, are not normally moved without the authority of a doctor or certified midwife, who should travel with the patient in the ambulance.

The removal of other cases of illness or accident are arranged by the hospital concerned or by the medical practitioner in charge of the patient. For private removals a written request, accompanied by a doctor's certificate, should be made to the County Medical Officer for his consideration. Provided that these requirements are fulfilled, no charge is made to users.

CARE OF MOTHERS, YOUNG CHILDREN, ETC.

The provision of services relating to the care of mothers and young children, midwifery, health visiting, home nursing, immunisation and vaccination, ambulance and domestic help is the responsibility of the Surrey County Council as local health authority. Day-to-day administration has been delegated to the Southern Divisional Health Sub-Committee and its officers, with headquarters at "Caberfeigh", Hatchlands Road, Redhill, (Telephone No. Redhill 3206).

For the convenience of reference, details of clinics are set out in tabular form on the following page.

<u>Type of Clinic</u>	<u>Location</u>	<u>Time of Session</u>
Maternity and Child Welfare Centres	Ewhurst Village Hall.	1st & 3rd Fri. 2 p.m.
	Peaslake Old School Room.	2nd & 4th Mon. 2 p.m.
	Holly Bush, Holmbury St. Mary.	2nd & 4th Fri. 2 p.m.
	The Vicarage, Betchworth.	1st Tues. 2 p.m.
	Brockham Homes, Brockham. (Voluntary)	1st & 3rd Fri. 2 p.m.
	Wesley Hall, Capel.	2nd & 4th Thurs. 2 p.m.
	Parish Hall, Charlwood.	2nd & 4th Wed. 2 p.m.
	R.A.F. Rehabilitation Unit, Headley Court.	2nd & 4th Wed. 2 p.m.
	Congregation School Room, Walton-on-the-Hill.	1st & 3rd Tues. 2 p.m.
	Mansion House, Leatherhead.	Fri. 2 p.m.
	Village Hall, N. Holmwood.	1st & 3rd Thurs. 2 p.m.
	Health Centre, Station Rd, Horley.	3rd Wed. a.m. and Fri. 2 p.m.
	Health Centre, Leigh.	2nd Mon. 2 p.m.
	Village Hall, Newdigate.	3rd Tues. 2 p.m.
	Village Hall, Ockley.	1st & 3rd Fri. 2 p.m.
	Parish Hall, Salfords.	2nd & 4th Tues. 2 p.m.
	Dene Street, Dorking.	Mon. & Wed. 2 p.m.
	Reading Room, Westcott.	2nd & 4th Mon. 2 p.m.
Ante-Natal	Dorking General Hospital.	Fri. 9.30 a.m.
	Welfare Centre, Station Road, Horley.	Wed. 2 p.m.
	St. John's Hospital, Redhill.	Tues 1.30 p.m.
	Mansion House, Leatherhead.	Tues. 1.30 p.m.
	Epsom District Hospital, Dorking Road, Epsom.	Mon. & Thurs. 1.30 p.m.
Tuberculosis	Health Centre, Dene St. Dorking.	Fri. 10 a.m.
	Chest Clinic, 1a Cecil Road, Redhill.	Thurs. 2 p.m., Every 2nd Thurs. 5.30 p.m., Tues. 2 p.m., Every Tues. 5.30 p.m.
	Chest Clinic, Epsom District Hospital.	Tues. — Thurs. 2 p.m. . 3rd Thurs. 5.30 p.m.

<u>Type of Clinic</u>	<u>Location</u>	<u>Time of Session</u>
Family Planning Association Clinic	St. John's Hospital, Redhill.	Tues. 6 - 7.30 p.m. (Except the Tuesday following a bank holiday)
	Dorking General Hospital.	Tues. 6 - 7.30 p.m. (Except the Tuesday following a bank holiday)
	Epsom District Hospital.	Fri. 7 p.m.
Venereal Diseases	St. John's Hospital, Redhill.	Males: Mon. 5 - 7 p.m.
	Royal Surrey County Hospital.	Males: Tues. & Fri. 5 - 7 p.m. Females: Mon. 2 - 7 p.m. Thurs. 9.30 - 11a.m.
	(And at the Out-Patient Dept. of many London Hospitals).	

IMMUNISATION AGAINST INFECTIOUS DISEASES

Immunisation against diphtheria, whooping cough and tetanus and vaccination against smallpox can be obtained from medical practitioners under the terms of the National Health Service Act, or on application at the County Council Health Centres.

Vaccination against poliomyelitis became available during the year. Because of shortage of material it is, at present, restricted to children born in the period 1947 - 1956 whose names were registered for the treatment earlier in the year.

B.C.G. vaccination against tuberculosis is available for children aged between 13 and 14 years, and for all children who have been in close contact with cases of pulmonary tuberculosis.

Details of the numbers treated in these various procedures will be found in Section 6 of this report.

FAMILY PLANNING ASSOCIATION

Two branches of the Family Planning Association are active in the district. The Dorking Branch of the Association, under the Chairmanship of Mrs. G. H. Woodman provides a weekly clinic at the Dorking General Hospital with the consent of the Hospital Management Committee and the Medical Superintendent. The Reigate, Redhill and District Family Planning Association, under the Chairmanship of the Hon. Lady Farrer, provides a similar clinic at the Redhill County Hospital. The medical staff is appointed by the Association and is assisted by voluntary workers. The work of the Association is concerned with the teaching of contraception to married persons, and also with the investigation of sub-fertility.

HOME HELP SERVICE

This service is administered locally by the Divisional Medical Officer of the Surrey County Council whose offices are situated at "Caberfeigh", Hatchlands Road, Redhill.

DOMICILIARY NURSING

Domiciliary nursing is carried out by the district nursing staff of the Surrey County Council.

VENEREAL DISEASES

The Regional Hospital Board is the authority responsible for the administration of matters dealing with the diagnosis and treatment of Venereal Diseases.

NATIONAL ASSISTANCE ACTS, 1948 and 1951

Section 47 of the Act of 1948 gave power to local authorities to take steps to deal with persons suffering from chronic illness or infirmity, who for one reason or another are not receiving proper care and attention, and who are unable to manage for themselves. As might be expected, the majority of these are old people who, in addition to physical illness, have some loss of mental power sufficient to curtail their reasoning powers but not serious enough to require their admission to hospitals for mental illness.

Under the 1948 Act, power was given to the local authority to apply to the Magistrates Court for an Order to obtain the compulsory removal, for a period not exceeding three months, of a person found in such conditions. As the result of experience, it was found that the time taken to comply with the legal requirements of the Act in obtaining an Order for compulsory removal was so long that the practical value of the powers given by the Act to local authorities was curtailed. An amending Act which came into force in 1951 enables authorities to adopt a more expeditious procedure in cases requiring urgent attention.

No action was taken under this section during the year, though investigation was called for in several cases.

WATER SUPPLY

The great majority of the 8,681 inhabited houses in the district are connected to the mains of one or other of the three undertakings which distribute water in the various parishes.

The position with regard to occupied buildings which do not have this advantage is as follows:-

Number of houses with well water supply	80
" " " dependent on springs	70
" " " with rainwater storage facilities	1
" " " without proper water supply	9 +

+ The dwellings in this category are all on one estate, and the owner has made arrangements for water to be carted to each of them.

WATER UNDERTAKINGS

Three water undertakings distribute water in the various parishes of the Rural District. They are the East Surrey Water Company, the Dorking Water Company, and the Guildford, Godalming and District Joint Water Board.

The Dorking Water Company serves the parishes of Capel, Holmwood and Ockley. It obtains its water from a series of 15 wells sunk into the Folkestone beds on the western outskirts of Dorking. The water is chlorinated before distribution. The East Surrey Water Company supplies the parishes of Betchworth, Buckland, Charlwood, Hoadley, Horley, Newdigate, Leigh and the Ranmore area of the parish of Wotton. Most of its water is obtained from deep wells in the chalk of the North Downs, and is softened and chlorinated before distribution.

The parishes of Abinger and part of the parish of Wotton are supplied by the Guildford, Godalming and District Water Board whose water comes from deep bore holes in the greensand in Guildford Rural District.

The chemical and bacteriological quality of the water supplies of these undertakings has remained consistently satisfactory and of a high standard of purity.

Typical results of chemical analysis of water supplied by the Dorking Water Company and the East Surrey Water Company are as follows:-

Results are in parts per 1,000,000

	<u>Dorking</u> <u>Water Co.</u>	<u>East Surrey</u> <u>Water Co.</u>
pH	7.06	9.1
Electric Conductivity	330	230
Chlorine as Chloride	18	20
Hardness		
Temporary	100	46,
Permanent	50	48

Water Undertakings (cont.)

	<u>Dorking</u> <u>Water Co.</u>	<u>East Surrey</u> <u>Water Co.</u>
Nitrate Nitrogen	4.8	5.8
Nitrite Nitrogen	Nil	Nil
Ammoniacal Nitrogen	0.000	0.030
Albuminoid Nitrogen	0.000	0.000
Metals		
Iron	less than 0.03	Nil
Zinc	0.8	Nil
Others	Nil	Nil
Free Carbon Dioxide	16	Nil
Total Solids	220	155
Oxygen Absorbed	0.25	Nil
Residual Chlorine	Absent	0.19

EXTENSION OF PIPED SUPPLIES

One small mains extension was carried out during the year, to serve four dwellings at Coldharbour, at a cost estimated to be £825. and towards which the respective owners contributed the sum of £316.

No further progress was possible in providing a piped water supply to The Dene, Abinger, where 26 dwellings depend upon a shallow well of variable quality. This long overdue provision was delayed by reason of protracted discussions over the provision of drainage facilities. The owner proposed a small disposal plant discharging its effluent into the Tillingbourne Stream but the Council preferred an extension of the sewer from Abinger Hammer towards The Dene. Unfortunately the cost of such an extension was the main obstacle.

A total of 420 premises were connected to the water mains, the details being as follows:-

	<u>New Houses (including</u> <u>conversions)</u>		<u>Existing</u> <u>Houses</u>
	<u>Private</u>	<u>Local Authority</u>	
Dorking Water Company	7	20	6
East Surrey Water Company	351	12	-
Guildford, Godalming and			
District Water Board	-	19	5
	358	51	11

Despite the progress that has been made in the provision of piped water supplies, there remain, in addition to The Dene, Abinger, mentioned above, several areas where piped water is most urgently needed. These are the Broadmoor, Friday Street and King George's Hill areas of the parish of Wotton: the Trap Lane area of the parish of Ockley: the Rusper Road area in the parish of Capel, and a further extension at Abinger Hammer towards Paddington Farm. It is hoped that some progress may be made in these areas in the near future.

DRAINAGE AND SEWERAGE

Six of the twelve parishes in the rural district are provided with systems of main drainage concerning which a short description was given in the Report for 1950.

During the year work began on the Charlwood Drainage Scheme and the sewerage of Abinger Hammer was completed.

In connection with the development of Gatwick Airport, it was agreed to take the sewage from the Airport to the Horley Sewage Works for treatment, by means of a new sewer, which could also be used to provide relief to those areas in Horley where in times of wet weather some surcharging of the sewer occurs.

Although some consideration was given to schemes of main drainage for other parishes no further progress was made.

The drainage arrangements of houses in the rural district was estimated to be

Number of houses connected to sewer	5,349
" " " " cesspools	2,509
" " " " septic tanks	312
" " " without proper drainage arrangements	<u>511</u>
	<u>8,681</u>

CLOSET ACCOMMODATION

The closet accommodation provided in houses in the rural district was estimated to be as follows:-

Number of houses with water closet	7,220
" " " " chemical closets	265
" " " " pail closets	<u>1,196</u>
	<u>8,681</u>

CESSPOOL EMPTYING

There was no change in the Council's policy of emptying six times a year, free of charge.

REFUSE COLLECTION AND DISPOSAL

This service continued to operate smoothly under the supervision of the Engineer and Surveyor, and provided a weekly service in the parishes of Horley and Holmwood, and a three-weekly collection in other parishes.

SWIMMING POOLS

There are two open air swimming pools in the district to which the public is admitted. Three samples of water were submitted for bacteriological examination, with satisfactory reports.

MORTUARY FACILITIES

The following arrangements are in force in the rural district with regard to the provision of mortuary services:-

Parishes of Horley and Charlwood

The Council own a single storey one-roomed mortuary at the rear of the Police Station in Massetts Road, Horley. The building is equipped with hot and cold water supplies and is gas illuminated. During the year 15 bodies were admitted and post mortem examinations held.

By modern standards the Horley mortuary is badly planned, badly sited and out of date in regard to equipment. Fortunately satisfactory alternative arrangements were offered by the Redhill Hospital Management Committee in the use of the mortuary at the Redhill County Hospital. Here there are not only adequate arrangements but also the services of a complete pathological department available. At least one year's notice of the discontinuation of the arrangements would be given by the Hospital Committee.

Other Parishes

By agreement with Leatherhead Urban Council, use is made of the mortuary facilities provided by that Council, the cost being apportioned on the basis of the rateable value of the districts concerned. The cost to this Council is approximately £18. per annum. During the year 9 bodies were dealt with under this arrangement.

With regard to the southernmost portions of the district an agreement is in force between Horsham Urban Council and this Council for the use of that authority's mortuary when required. During the year, however, no use was made of this facility.

MOVEABLE DWELLINGS

There are four established caravan sites in the district situated at :-

- (i) Rickwood, Beare Green.
- (ii) New Close Farm, Beare Green.
- (iii) Blue Ridges, Vann Lake Road, Ockley.
- (iv) The Cottage Camp Site, Box Hill Road, Tadworth.

With the exception of the site at New Close Farm, all these caravan sites were in existence prior to the appointed day fixed by the Town and Country Planning Act, 1947, and their use had, therefore, been established.

Moveable Dwellings (cont.)

Rickwood Caravan Site

The owner has continued to improve this site, and living and sanitary conditions are now much more satisfactory than in the past.

New Close, Beare Green

This is a site established since the appointed day fixed by the Town and Country Planning Act, 1947, and, as a result, it has been possible for its development to be regulated. Conditions attaching to the licensing of the site included the provision of a proper building with water closets, baths and washing facilities. The site has been well maintained and the average number of caravans at any one time is about 56, and at no time has exceeded the maximum prescribed by the Council.

Blue Ridges, Ockley

This is a small site limited to 15 caravans, which is operated and managed in a satisfactory manner.

Cottage Camp Site, Boxhill Road, Tadworth

This site is limited to one caravan and four chalets which are used principally for holiday purposes.

In addition there are a few small groups of caravans and a number of single vans in various parts of the district. Some of these are used in connection with agricultural employment.

FACTORIES AND WORKSHOPS

FACTORIES ACTS, 1937 and 1948

The following return has been made to the Ministry of Labour and National Service in accordance with Section 128 (3) of the Factories Act, 1937.

Premises	Number on Register	Inspec- tions	Written Notices	Occu- piers Prose- cuted
(i) Factories in which Sections 1,2,3,4, and 6 are to be enforced by Local Authorities	47	10	4	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	76	-	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	-	-	-	-
Total	123	10	4	-

Cases in which defects were found

Particulars	Number of cases in which defects were				Prose- cutions Insti- tuted
	Found	Remedied	Referred to H.M.	by H.M.	
Want of cleanliness	1	1	-	-	-
Overcrowding	-	-	-	-	-
Unreasonable temperature	-	-	-	-	-
Inadequate ventilation	-	-	-	-	-
Ineffective drainage of floors	-	-	-	-	-
Sanitary Conveniences					
(a) Unsufficient	-	-	-	-	-
(b) Unsuitable or defective	3	3	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
Total	4	4	-	-	-

Factories (cont)

The 123 premises on the Register of Factories on the 31st December, 1956, were as follows:--

	<u>Non-Mechanical</u> <u>Power</u>	<u>Mechanical</u> <u>Power</u>
Addressograph Manufacturers		1
Agricultural Engineers		2
Aircraft Repairers		2
Bakers	3	2
Ball Bearing Manufacturers		1
Band Saw Maker		1
Boot and Shoe Repairers	7	2
Broom Makers	1	
Brick Works		8
Builder's Workshops	9	3
Cycle Repairers	7	
Drawing Office Equipment Manufacturers		1
Electrical Engineers		1
Engineers		4
Explosive Manufacturers		1
Fine Art Stationery Manufacturers		1
Flue Block Manufacturers		1
Furniture Makers	4	1
Fur Processors		1
General Engineers		3
Garages and Motor Engineers	2	17
Instrument Maker	1	
Laundries		4
Line Works		1
Plastic Manufacturers		2
Portable Building Makers		3
Printers		3
Radio Repairers	5	
Research Laboratories		3
Rubber Tyre Processing		1
Sawyers		2
Super Charger Manufacturers		1
Tailors	2	
Tool Makers		2
Undertakers	2	
Watch Repairers	4	
Valet and Dry Cleaners		1
	<hr/> 47 <hr/>	<hr/> 76 <hr/>

Returns relating to the demolition, closing and repair of houses under the Housing and Public Health Acts are now submitted quarterly to the Ministry of Housing and Local Government. It is accordingly suggested that the housing statistics usually included in the Annual Report of the Medical Officer of Health need not in future be as detailed or comprehensive as in the past. An abridged summary of the housing statistics for the year is set out below:-

1.	<u>Inspection of dwelling-houses during the year</u>	
(a)	Total number of dwelling-houses inspected for Housing defects (under Public Health or Housing Acts)	983
(b)	Number of inspections made for the purpose	1,437
2.	(a) Number of dwelling-houses (included under sub-head 1 above) which were inspected and recorded under the Housing Consolidated Regulations, 1925.	-
	(b) Number of inspections made for the purpose	-
No houses were inspected and recorded under the Housing Consolidated Regulations, 1925 for the reason that following the completion of the "Hobhouse" survey all dwellings to which the Regulations were considered to apply, have been inspected and recorded.		
3.	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation.	8
4.	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation.	26
11.	<u>Remedy of defects during the year without service of formal notices.</u>	
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers.	49
111.	<u>Action under Statutory Powers during the year.</u>	
(a)	<u>Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.</u>	
1.	Number of dwelling-houses in respect of which notices were served requiring repairs.	6
2.	Number of dwelling-houses which were rendered fit after service of formal notices.	
	(a) By owners	5
	(b) By local authority in default of owners.	1

Housing (cont.)

111.	(b)	<u>Proceedings under Public Health Acts</u>	
	1.	Number of dwelling-houses in respect of which notices were served requiring to be remedied	--
	2.	Number of dwelling-houses in which defects were remedied after service of formal notices	
	(a)	By owners	--
	(b)	By Local Authority in default of owners	--
	(c)	<u>Proceedings under Sections 11 and 13 of the Housing Act, 1936</u>	
	1.	Number of dwelling-houses in respect of which Demolition Orders were made	1
	2.	Number of dwelling-houses demolished in pursuance of Demolition Orders	1
	(d)	<u>Proceedings under Section 12 of the Housing Act, 1936</u>	
	1.	Number of separate tenements of underground rooms in respect of which Closing Orders were made	1
	2.	Number of separate tenements or underground rooms in respect of which Closing Orders were determined the tenement or room having been rendered fit	--
	3.	Number of houses in respect of which undertakings were received that the premises would not be re-occupied until made reasonably fit for human habitation	6

In two cases Undertakings were to carry out work to the satisfaction of the Council.

More information relating to the work of the Public Health Department in respect of housing conditions is to be found in the report of the Chief Public Health Inspector.

ERECTION OF NEW HOUSES

I am indebted to the Council's Engineer and Surveyor for the following details of the number of new houses erected in the district during the year.

By private enterprise	218
By local authority	73
Conversions by private enterprise	3

INSPECTION AND SUPERVISION OF FOOD

The Chief Public Health Inspector's report contains information on the work done in connection with the inspection of premises used in the preparation of food, with the inspection of food and with the supervision of the storage and sale of ice-cream.

ADULTERATION OF FOOD

The Surrey County Council continued to administer the sections of the Food and Drugs Act, 1938, dealing with the adulteration of food. I am indebted to the County Medical Officer of Health for the information that a total of 92 samples for analysis were taken in this district by his staff. Of these 76 were of milk, 4 of whisky and the remainder of miscellaneous articles of foodstuffs. Eight samples of milk were found to be below standard.

The information was also given that within that part of the County in which the County Council acts as Food and Drugs authority a total of 968 samples were taken for analysis, including 718 of milk. Forty-two samples were found to be adulterated or irregular, 21 of these being of milk. Legal proceedings were instituted and a conviction obtained against a dairy farmer for selling Channel Islands milk deficient in milk fat.

6. PREVENTION OF, AND CONTROL OVER, INFECTIOUS DISEASE

Table I includes the incidence and death rates of various infectious diseases. Incidence rates are estimated per 1,000 population with the exception of the rate for puerperal pyrexia which is based on 1,000 live and still births.

Table IV shows the number of cases of infectious diseases notified during 1956, classified according to age and sex. Table V shows the incidence of notifiable infectious diseases in the various Parishes of the Rural District.

SMALLPOX

No case of smallpox was notified during the year.

Vaccination against Smallpox

During the year notifications were received from medical practitioners of 261 primary vaccinations, and 132 re-vaccinations which had been performed by them. Of the primary vaccinations 211 related to children under the age of one year, equivalent to 47% of the number of births registered in the district during the year. This compares with a recent estimated vaccination rate of 34% for England and Wales.

SCARLET FEVER

Twenty cases of scarlet fever were notified during the year, this being the same figure as last year. There was no mortality from the disease, which continued to be of a mild type. Notwithstanding this 11 cases were removed to hospital for isolation and treatment. On this point experience has shown that many uncomplicated cases of scarlet fever can be safely treated at home. Furthermore, it is now widely recognised that the micro-organism causing scarlet fever is also the cause of one variety of sore throat. In other words, a streptococcal sore throat is scarlet fever infection without the rash. It follows that extreme restrictive measures applied to scarlet fever contacts are difficult to justify if cases of streptococcal sore throat (which is not a notifiable disease) are ignored. In uncomplicated cases, scarlet fever and streptococcal sore throat are infectious during the incubation period and the period of clinical illness; infectivity diminishes steadily thereafter and is negligible in three weeks, though occasionally a carrier state develops which may persist for months. Persons with untreated complications, such as purulent discharges from the nose or ear, may remain infectious for long periods.

It is recommended that scarlet fever and streptococcal sore throat be regarded as variants of the same disease. Cases should be excluded from school for three weeks, and should not be allowed back in school if they have any discharge from nose or ear or any "septic spots". When treatment at home or in hospital lasts for more than 14 days, cases should, nevertheless, be excluded for seven days after home treatment has ceased or the patient has been discharged from hospital.

Adult contacts engaged in the preparation or service of school meals should be excluded until the Medical Officer of Health certifies that they may resume work. In general, other contacts, if healthy, need not be excluded, unless a severe type of scarlet fever or of streptococcal infection associated with grave complications becomes prevalent in the district. In that event the position with regard to exclusion of contacts would be kept under constant review.

DIPHTHERIA

For the eighth year in succession no case of diphtheria was notified in the Rural District.

Reference to Table VI indicates the decline which has taken place in the incidence of this disease.

Immunisation against Diphtheria

Treatment can be obtained from general practitioners under the terms of the National Health Service Act, or from clinics arranged by the local health authority, these being held at regular intervals at all Infant Welfare Centres serving the district. These arrangements are intended primarily for infants and others under school age. Clinics in schools have been organised by the Divisional Medical School Officer for pupils requiring treatment, usually the reinforcing course. The aim is for every child to receive a primary treatment in its first year of life, with secondary treatments consisting of single injections at intervals of 3 to 4 years up to the end of school life to reinforce the original treatment. It is not claimed even with such treatment that absolute immunisation will be attained for every child, but there is clear evidence that the risk of an untreated child contracting diphtheria is four times as great as that of an immunised child, and that the risk of death is nearly thirty times as great.

Immunisation against diphtheria can be combined with immunisation against whooping cough and, if desired, against tetanus. It is considered desirable, however, that the use of combined prophylactics should be confined to the first and fourth quarters of the year, to avoid the possibility of the period of treatment coinciding with the season of maximum incidence of poliomyelitis.

Notifications were received from medical practitioners and clinics that 387 children received primary treatment and 880 received reinforcing doses. The following figures show how the facilities for treatment have been used.

	<u>Primary Treatment</u>	<u>Reinforcing Doses</u>
Treated at Clinics and Schools	170	780
Treated by General Practitioners	<u>217</u>	<u>100</u>
	<u>387</u>	<u>880</u>

In 218 infants the treatment was completed before reaching the age of one year, representing 53% of the number of births registered during the year.

It is estimated that 55% of children under the age of 15 years had been treated in the period 1952-56 and were, therefore, still in an effective state of immunity. The comparable figure for 1955 was 52%.

WHOOPING COUGH

Ninety-six cases of whooping cough were notified compared with 90 in the previous year. No death was registered as due to this disease.

Immunisation against Whooping Cough

Notifications were received from medical practitioners and clinics that 331 children had received a course of treatment, in the majority of cases combined with diphtheria immunisation, and in some cases with immunisation against tetanus also. Immunisation against whooping cough should be completed as early as possible in the first year as this disease is more dangerous to infants than at any other age.

MEASLES

Ninety-nine cases of measles were notified during the year compared with 360 in 1955. No death from the disease was recorded.

ACUTE POLIOMYELITIS

Two cases of poliomyelitis were notified during the year, both of the paralytic type. The patients were residents of Horley and one suffered from a very severe attack.

The production of an effective vaccine against poliomyelitis is now proceeding, though not yet in sufficient quantities to allow more than a small proportion of the child population to be treated. The number treated during 1956 was 98 out of a total of 947 for whom consents had been received.

PARATYPHOID FEVER

One case of paratyphoid B infection was notified, the patient being a girl resident in the Parish of Horley.

PUERPERAL PYREXIA

The fact that only a single notification of puerperal pyrexia was received is misleading, and results from an administrative procedure which allocates a notification of an infectious disease to the district in which the patient is resident at the time of diagnosis. A large number of confinements of residents of the Rural District take place each year in hospitals which are situated in other districts, particularly in Reigate and Dorking. Cases of puerperal pyrexia occurring in these institutions are assigned to the areas in which the hospitals are located, thus tending to raise the notification rate in the districts concerned and to lower it in the Rural District.

TETANUS

No case of tetanus was reported during the year. However, this condition is not notifiable and it is possible for the illness to occur without coming to the notice of the Public Health Department, unless it proceeds to a fatal termination.

Immunisation against Tetanus

During the year the Minister of Health approved an extension of the County Council's immunisation arrangements to include immunisation against tetanus. Treatment may be obtained from the family doctor or from a children's clinic. In the summer months the treatment should be given separately, but in the winter months it can be combined with the agents used for active immunisation against diphtheria and whooping cough, thus reducing the number of inoculations and affording simultaneous protection against all three diseases.

PROTECTION AGAINST OTHER DISEASES

Protective inoculation against other infectious diseases, such as enteric fever, cholera, yellow fever, etc., is necessary in the case of persons proposing to visit foreign countries where these diseases are endemic, and is usually undertaken at approved centres. The International Certificate required in such cases must be authenticated by the Medical Officer of Health of the district in which the vaccinator practises. It is by no means uncommon for visitors to the Continent to contract elementary infections, including typhoid and paratyphoid fevers. People intending to travel in Europe would be well advised to be inoculated against these diseases before setting out, even to countries where the treatment is not a compulsory condition of entry.

DYSENTERY

The unusually large number of notified cases of bacillary dysentery is of less serious epidemiological significance than might be supposed. Only 2 of the cases, quite unconnected with each other, occurred amongst the general population, the remaining 31 being affected in outbreaks of the disease in a children's resident nursery situated in Holmwood. The illness in every case was caused by the Sonne type of organism, which is liable to spread very rapidly in residential institutions and is exceedingly difficult to eradicate.

TUBERCULOSIS

Twenty-three primary notifications of tuberculosis were received from medical practitioners of persons certified to be suffering from that disease. These concerned residents of the district in which the disease was recognised for the first time. In Table IV they are classified by sex and age, and in Table V by parish of residence. They include 3 cases of the non-pulmonary type of disease.

Other names added to the register were those of 13 persons who came to live in the district, having previously been notified in other areas. The name of one person which had previously been removed was restored on the patient's return to live in this area.

Registration of Notified Persons

During the year the names of 37 persons mentioned in the previous paragraphs were added to the tuberculosis register, and 27 were removed. Details of these alterations are as follows:-

<u>ADDITIONS TO REGISTER</u>		<u>REMOVALS FROM REGISTER</u>	
Primary notifications relating to persons already residing in the district	23	By removals to other districts	11
transfer of persons notified in other areas, now residing in this district	12	By recovery	13
Name restored on return to district	<u>1</u>	By death	3+
	<u>37</u>		<u>27</u>

- + In 1 case the cause of death of the notified person was not attributed to tuberculosis on the death certificate.

At the end of the year the number of names on the register was as follows. The previous year's figures are set out for comparison.

	<u>1955</u>		<u>1956</u>	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
Male	60	20	67	19
Female	<u>49</u>	<u>21</u>	<u>54</u>	<u>20</u>
	<u>109</u>	<u>41</u>	<u>121</u>	<u>39</u>

Deaths

Two deaths from pulmonary tuberculosis were assigned to the district, giving a death-rate of 0.07. The death-rate for England and Wales was 0.12.

Table VII illustrates the satisfactory trend which the mortality figures for tuberculosis have assumed in recent years.

B. C. G. Vaccination

This treatment is available, through the Chest Physician, to contacts in the family of tuberculous persons, if preliminary testing shows that they have not already been infected. It has also been offered to children aged between 13 and 14 years at both maintained and independent schools.

The treatment in schools is carried out by the staff of the Divisional Medical Officer who has provided figures in relation to the work done in local schools in 1956.

B. C. G. Vaccination (c nt.)

Number of children eligible for treatment	240
Number consenting to treatment	137
Percentage consenting to treatment	57.1
Number Mantoux tested	123
Number giving a negative reaction	100
Percentage giving a negative reaction	81.3
Number of negative reactors vaccinated	100
Percentage of negative reactors vaccinated	100

The percentage acceptance of testing and vaccination and of negative reactors successfully vaccinated were very satisfactory and compare favourably with corresponding findings in other districts.

TABLE I. COMPARATIVE BIRTH, DEATH AND MATERNAL MORTALITY RATES, AND INCIDENCE RATES OF INFECTIOUS DISEASES IN THE YEARS 1955 - 1956.

	1956	1955
<u>Rates per 1,000 Population</u>		
<u>BIRTHS</u>		
Live Births	15.9	14.8
Still Births	0.21	0.43
<u>DEATHS</u>		
All Causes	9.5	10.7
Typhoid and Paratyphoid	-	-
Whooping Cough	-	-
Diphtheria	-	-
Tuberculosis	0.07	0.18
Influenza	0.04	-
Smallpox	-	-
Poliomyelitis	-	-
Pneumonia	0.28	0.36
<u>NOTIFICATIONS (Corrected)</u>		
Typhoid Fever	-	-
Paratyphoid Fever	0.04	0.04
Meningococcal Infection	0.04	-
Scarlet Fever	0.70	0.82
Whooping Cough	3.38	3.24
Diphtheria	-	-
Erysipelas	0.14	0.14
Smallpox	-	-
Measles	3.48	13.0
Pneumonia	0.53	0.47
Poliomyelitis, paralytic	0.07	0.11
non-paralytic	-	0.25
Food Poisoning	-	0.04
Dysentery	1.16	0.04
Tuberculosis	0.81	0.36
<u>Rates per 1,000 Live Births</u>		
<u>INFANT MORTALITY</u>		
Under 1 year of age	20.0	24.3
Under 4 weeks of age	8.9	17.0
<u>Rates per 1,000 Total Births</u>		
Still Births	13.1	28.3
Puerperal Pyrexia (Notification of)	0.04	2.4
Maternal Mortality	-	-

TABLE II

COMPARATIVE BIRTH, DEATH AND INFANT MORTALITY RATES, 1931-1956

(DECENNIAL AVERAGES 1931-1950)

Year	Birth Rate per 1,000 Population		Death Rate per 1,000 Population		Death Rate of children under 1 year of age, per 1,000 Live Birth	
	England and Wales	Dorking and Horley	England and Wales	Dorking and Horley	England and Wales	Dorking and Horley
1931-1940	14.9	14.1	12.2	12.0 (10.6) +	57.1	45.3
1941-1950	17.02	17.4	11.7	11.3	42.6	32.0 (13.2) ++
1951	15.5	15.8 (15.5) +	12.5	12.4 (11.3)	29.6	19.4 (8)
1952	15.3	16.5 (16.2)	11.3	11.1 (10.1)	27.6	9.2 (4)
1953	15.5	15.6 (15.5)	11.4	9.3 (8.4)	26.8	14.3 (6)
1954	15.2	15.8 (16.8)	11.3	9.0 (8.1)	25.5	18.3 (8)
1955	15.0	14.8 (15.7)	11.7	10.7 (9.6)	24.9	24.3 (10.0)
1956	15.6	15.9 (16.9)	11.7	9.5 (9.2)	23.8	20.0 (9)

+ Bracketed figures represent standardised rates

++ Bracketed figures represent number of deaths

TABLE III

CAUSES OF DEATH IN THE DORKING AND HORLEY RURAL DISTRICT

	M	F	Total
1. Tuberculosis of the Respiratory System	2	--	2
2. Other forms of Tuberculosis	--	--	--
3. Syphilitic Disease	--	--	--
4. Diphtheria	--	--	--
5. Whooping Cough	--	--	--
6. Meningococcal Infections	--	--	--
7. Acute Poliomyelitis	--	--	--
8. Measles	--	--	--
9. Other infective and parasitic diseases	2	--	2
10. Malignant neoplasm, stomach	3	2	5
11. Malignant neoplasm, lung, bronchus	6	1	7
12. Malignant neoplasm, breast	--	5	5
13. Malignant neoplasm, uterus	--	--	--
14. Other malignant and lymphatic neoplasms	19	9	28
15. Leukaemia, aleukaemia	2	--	2
16. Diabetes	3	--	3
17. Vascular lesions of nervous system	16	29	45
18. Coronary disease, angina	23	6	29
19. Hypertension with heart disease	2	5	7
20. Other heart disease	18	24	42
21. Other circulatory disease	4	5	9
22. Influenza	--	1	1
23. Pneumonia	2	6	8
24. Bronchitis	10	7	17
25. Other diseases of respiratory system	3	1	4
26. Ulcer of stomach and duodenum	3	1	4
27. Gastritis, enteritis and diarrhoea	1	1	2
28. Nephritis and nephrosis	2	1	3
29. Hyperplasia of prostate	4	--	4
30. Pregnancy, childbirth and abortion	--	--	--
31. Congenital malformations	3	1	4
32. Other defined and ill-defined diseases	8	13	21
33. Motor vehicle accidents	5	1	6
34. All other accidents	--	4	4
35. Suicide	2	2	4
36. Homicide and operations of war	--	--	--
	143	125	268

TABLE IV

NOTIFICATION OF INFECTIOUS DISEASES BY AGE AND SEX

	Under 1 year		1 - 2		3 - 4		5 - 9		10 - 14		15 - 24		25 - 44		45 - 64		65 years & over		All ages		Total all ages both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Tuberculosis, Pulmonary	-	-	-	-	-	-	1	-	1	-	4	3	4	2	1	2	-	-	11	9	20
Non-Pulmonary	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	3
Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal Infection	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Scarlet Fever	1	-	-	-	3	-	8	4	2	-	1	-	-	-	-	-	-	-	14	6	20
Whooping Cough	1	2	11	3	20	19	14	19	2	1	-	-	2	4	-	-	-	48	48	96	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	1	1
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	3	1	4
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	3	2	6	5	6	10	18	23	6	15	3	1	1	-	3	-	-	43	8	56	99
Pneumonia	-	-	1	1	1	2	1	1	-	-	2	1	1	-	1	1	-	8	1	9	17
Poliomyelitis, Paralytic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Non-Paralytic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	1
Dysentery	1	4	10	3	7	3	-	-	-	-	-	-	-	-	-	-	-	-	20	1	33

TABLE V

NOTIFICATION OF INFECTIOUS DISEASES BY PARISHES

	Abinger	Bechworth	Buckland	Capel	Charlwood	Headley	Holmwood	Horley	Leigh	Newdigate	Ockley	Wotton	TOTAL
Tuberculosis, Pulmonary	-	2	-	1	1	-	2	13	-	1	-	-	20
Non-Pulmonary	-	-	-	-	-	-	-	3	-	-	-	-	3
Typhoid Fever	-	-	-	-	-	-	-	1	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-	-	-	1	-	-	-	-	1
Meningococcal Infection	-	-	-	-	-	-	-	1	-	-	-	-	1
Scarlet Fever	-	3	-	6	-	-	-	9	-	2	-	-	20
Whooping Cough	1	1	-	18	1	-	21	22	-	2	29	1	96
Diphtheria	-	-	-	-	-	-	-	3	-	-	1	-	-
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	4
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-
Pneumonia	1	1	-	38	5	26	1	24	1	1	1	-	99
Poliomyelitis, Paralytic	1	-	-	-	-	-	-	9	-	-	6	-	17
Non-Paralytic	-	-	-	-	-	-	-	2	-	-	-	-	2
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	-	-	-	1	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	31	1	-	-	1	-	1
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	33

TABLE VI

INCIDENCE OF DIPHTHERIA IN THE DORKING AND HORLEY RURAL DISTRICT 1934 - 1956

Year	Number of cases notified	Incidence Rate per 1,000 Population	Mortality Rate per 1,000 Population
1934 - 1938	53	0.53	0.04
1939 - 1943	11	0.09	0.04
1944 - 1948	8	0.07	-
1949 - 1953	-	-	-
1954	-	-	-
1955	-	-	-
1956	-	-	-

TABLE VII

TUBERCULOSIS INCIDENCE AND MORTALITY 1934-1956

(QUINQUENNIAL AVERAGES 1934-1953)

<u>Year</u>	<u>Notifications</u> Number of new notifications	<u>Notification Rate per</u> 1,000 Population	<u>Deaths</u> Total	<u>Death Rate per</u> 1,000 Population
1934 - 1938	19.0	0.77	12.4	0.62
1939 - 1943	20.4	0.90	11.0	0.46
1944 - 1948	24.4	1.05	10.8	0.48
1949 - 1953	19.8	0.73	4.2	0.16
1954	19	0.69	6	0.22
1955	10	0.36	5	0.18
1956	23	0.81	2	0.07

PUBLIC HEALTH DEPARTMENT

Council Offices,
Chalkpit Lane,
DORKING.

September, 1957.

To the Chairman and Members of the
Dorking and Horley Rural District Council

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in submitting for your consideration a Report on the work of the Public Health Department for the year 1956.

In the preface of my last Annual Report I referred briefly to the great increase in local government legislation which placed many new responsibilities on local Councils, and in 1956 this trend was continued. New additions to the Statute Book including:-

Clean Air Act, 1956.

Slum Clearance (Compensation) Act, 1956.

Food Hygiene (Amendment) Regulations No. 1 1956,

and associated circulars.

There are now more than 26 Acts of Parliament which in greater or lesser degree contain provisions relating to Public Health, quite apart from some 18 enactments relating to housing, and there are, of course, a myriad of circulars associated therewith. To keep pace with this wealth of literature is no mean task, particularly when so much is not sent to a local authority as a matter of course. The result is that it is not always possible to deal at a Committee Meeting, with a point raised during discussion, or to advise an enquiring property owner or tenant immediately his questions are posed. In turn this leads to delay, and brings the inevitable complaint that local authorities are "slow" in action.

The work of the department in 1956 is summarised and presented in the following pages, for your consideration, and I trust merits your approval.

I must acknowledge with sincere appreciation, as I do year by year, the support of the Chairman and Members of the Public Health and Housing Committee, and to all my colleagues my grateful thanks for their help and co-operation.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

ERIC A. ATKINSON.

Chief Public Health Inspector.

PUBLIC HEALTH

Inspections and Visits

The total number of inspections and visits on various public health matters during 1956 was 2,307, as compared with 2,178 in 1955. Details are as follows:-

(a) Housing Act, 1936

Inspection of dwellings	667
" " re overcrowding	1
" " housing applicants	10

(b) Public Health Act, 1936

Inspection of dwellings	216
" " moveable dwellings	22
" " water supply	67
" " drainage work	113
" " defective cesspools	85
" " ditches and watercourses	45
" " smoke nuisances	-
Visits and Enquiries re Infectious illness	99
Number of rooms disinfected	16
Visits re Pests (Flies, Beetles, Rats, etc)	66

(c) Food and Drugs Act, 1955

Inspections of Bakehouses	1
" " Butchers' Shops	11
" " Cafes and Restaurants	12
" " Dairies and Milkshops	21
" " Farms and Cowsheds	4
" " Fishmongers	3
" " Ice Cream Dealers	5
" " Licensed Premises	2
" " Other Food Premises	31
Visits to Slaughterhouses	144
" " inspect unsound food	19

(d) Factories Act, 1937

Inspection of Factories with power	10
Visits re Outworkers	1

(e) Pet Animals Act, 1951

Inspection re Pet Shops	2
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(f) Petroleum (Consolidation) Act, 1928

Inspection of Petroleum Installations	30
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(g) Sampling: No. of Samples taken for examination:-

Ice Cream	-
Milk	241
Water	103
Pathological Specimens	6

(h) Other Visits not classified 254

TOTAL 2,307

Public Health (cont.)

NOTICES

Seventy-three preliminary notices were issued during the year, under various Acts and Regulations, as follows:-

Housing Act, 1936

Section 9	26
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Public Health Act, 1936

Section 39	Insufficient or inadequate drainage	9
" 50	Overflowing or leaking cesspools	4
" 93	(i) Premises prejudicial to health	2
	(ii) Animals kept so as to be prejudicial to health or a nuisance	-
	(iii) Offensive accumulations or deposits	1
" 259	Obstructed or polluted ditches	10
	Insufficient closet accommodation	3

Public Health (Water) Act, 1945

Absence of proper water supply	5
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FOOD AND DRUGS ACT, 1955

Food Hygiene Regulations

Protection of Food from contamination	2
Personal cleanliness (including smoking offences)	1
Carrying and wrapping of open food	1
Sanitary accommodation	2
Provide Water supply	1
Provide wash-hand basins	3
Provide First-Aid materials	-
" accommodation for clothing	1
" facilities for washing food equipment	1
Cleanse and repair food rooms	<u>1</u>
TOTAL	<u>73</u>

Forty-nine of these seventy-three Notices were complied with without further action, and in nine cases statutory or abatement notices were issued. Twenty-three preliminary notices and one statutory notice were outstanding at the end of the year.

WORK IN DEFAULT

The execution of work in "default" of the owners was carried out in two instances, as follows:-

- (i) Housing repairs to a property, the aged owner being unable to bear the expense. The cost of so doing remaining a charge on the premises.
- (ii) Repairs to a septic tank serving three properties, the cost thereof being repaid by the respective owners.

Inspection and Supervision of Food

Generally

The following details are extracted from the Register of Food Premises:-

	<u>No. in District</u>
Bakers Shops	5
Bakehouses	4
Butchers	14
Fishmongers	2
Cafes	24
Factory Canteens	7
Fried Fish Shops	2
Grocers	16
Grocerygrocers	12
Hotels	7
Ice-cream dealers	58
Ice-cream manufacturers	3
Public Houses	34
School Canteens and Kitchens	3
Snack Bars	3
	<u>194</u>

The number of visits (90) that have been made to these 194 premises is, in my opinion, below the amount of supervision that ought to be given. It should be possible in any area to visit each food premises at least once a year. Unfortunately, this has not been possible. Nevertheless, within the resources available, the supervision of food is by no means neglected, as later paragraphs on milk and meat inspection testify. I would, however, like to see an increase in the amount of supervision given to food premises.

MILK

The number of samples of milk taken for bacteriological and biological examination was slightly higher than the number taken in 1955. Two hundred and eighteen samples were taken for bacteriological examination (12 failing the prescribed tests) and 29 for biological examination, all with negative results.

A review of the samples taken over the past five years shows that although the number of samples taken has increased, the number failing the prescribed tests has progressively decreased as the following table shows. Figures in brackets are number failing tests:-

<u>Grade</u>	<u>1952</u>	<u>1953</u>	<u>1954</u>	<u>1955</u>	<u>1956</u>
Tuberculin tested					
Pasteurised	16 (4)	14 (2)	13	13	27
Tuberculin tested	64 (16)	50 (7)	67 (8)	54 (5)	46 (10)
Accredited	3	3	-	-	-
Pasteurised	46 (7)	48 (3)	173 (8)	130 (2)	137 (2)
Sterilised	6	2	8	4	4
Ungraded	<u>51 (2)</u>	<u>31</u>	<u>34</u>	<u>13</u>	<u>4</u>
	186 (29)	148 (12)	295 (16)	214 (7)	218 (12)
Percentage of failures	16.1%	8.1%	5.4%	3.2%	5.5%

Milk (cont.)

One would like to think that this improvement has been brought about by the constant supervision and sampling procedures, but although this may have played its part, the real reason is probably to be found in the gradual elimination of the small trader, and his replacement by the large combine. The influence of the Milk (Special Designation) (Specified Areas) No. 2 Order 1954 must not be overlooked. By this Order no raw ungraded milk could be retailed in the rural district after the 21st October, 1954.

The Milk combine with its larger financial resources is not only able to install, maintain, and operate the best milk handling-processing equipment available, but is also able to set up and operate complete laboratory control equipment and personnel. This is not to say that the combine is without its own problems and difficulties, one of the most important being the examination of bottles after washing and cleansing. So far, this examination relies almost entirely upon the human element, with the result that complaints of dirty bottles are not infrequent. Two such complaints were received during the year. In one instance the Council issued a warning to the dairyman concerned, but in the second case where the complaint was one of a series over a long period, the Council decided to institute legal proceedings, the firm being fined £15. 0s. 0d. and £9. 9s. 0d. costs.

Dairymen often complain, with every justification, of the condition in which bottles are sometimes returned to the dairies. It would appear equitable that if a dairyman is liable to a penalty for sending out milk in a dirty bottle, the consumer ought also to be liable to a penalty for failure to rinse out bottles before returning to the dairy, or for any misuse.

CREAM

In addition to the samples of milk taken for examination, twelve samples of Double Cream were examined for the presence of faecal coli; three proving positive.

REGISTRATION AND LICENCES

The number of persons on the Milk Retailers Register on the 31st December, 1956 was 23.

Thirty-two licences were issued in respect of graded milk as follows:-

	<u>Dealers</u>	<u>Supplementary</u>
Tuberculin Tested	4	4
Pasteurised	7	9
Sterilised	<u>4</u>	<u>4</u>
	15	17

MEAT AND SLAUGHTERHOUSES

Two of the three licensed slaughterhouses continued to be used in 1956. The following table summarises the number of animals killed, and the results of the inspections.

Meat and Slaughterhouses (cont.)

It is pleasing to be able to record that 100 per cent inspection was possible, and due acknowledgement must be made of the co-operation of the slaughterhouse operators who have done much to lighten the task of meat inspection.

The number of animals slaughtered is given in the following table:-

	Cattle	Calves	Sheep and Lambs	Pigs	Horses	Goats
Number killed (if known)						
Charlwood	18	147	132	426	Nil	5
Ockley	16	10	8	182	Nil	-
Number inspected	34	157	140	608	Nil	5
All diseases except Tuberculosis and Cysticerci						
Whole carcasses condemned	Nil	2	Nil	1	Nil	-
Carcasses of which some part or organ was condemned	4	Nil	3	19	Nil	-
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	11.7	1.2	2.1	3.1	Nil	-
<u>Tuberculosis only</u>						
Whole carcasses condemned	-	Nil	Nil	Nil	Nil	-
Carcasses of which some part or organ was condemned	Nil	Nil	Nil	12	Nil	-
Percentage of the number inspected affected with tuberculosis	Nil	Nil	Nil	1.9	Nil	-
<u>Cysticercosis</u>						
Carcasses of which some part or organ was condemned	Nil	Nil	Nil	Nil	Nil	-
Carcasses submitted to treatment by refrigeration	Nil	Nil	Nil	Nil	Nil	-
Generalised and totally condemned	Nil	Nil	Nil	Nil	Nil	-

Slaughterman's Licences

Five licences were issued to slaughtermen practising in the rural district

OTHER FOOD

Unsound Food

Nineteen visits were made to food premises for the purpose of examining food reputed as being unfit for human consumption.

As result of these visits the following quantities and types of foodstuffs were surrendered to the Public Health Inspectors as being unfit for human consumption:-

(a) Canned Food

Meat	Corned Beef	5 x 6-lb tins
	Luncheon Meat	3 x 4-lb "
	Pigs Livers	28-lbs
	Stewed Steak	48 x 10-lb
Fish	Pilchards	2 x 6-oz tins
	Sardines	8,147 x 4-oz tins
Fruit and Vegetables	Asparagus	1 x 8½-oz tin
	Butter Beans	356 x 14-oz tins
	Cherries	1 x 14-oz tin
	Damsons	145 x 29-oz tins
	Oranges	3 x 3-oz tin
	Pineapples	11 x 15-oz tins
	Tomatoes	175 x 16-oz tins

(b) Other Foods

Home killed meat

Beef 42-lbs

Imported Meat

Beef 457-lbs

The total weight involved was approximately 1 ton 10 cwts 3 qrs and disposal was by treatment in the Reigate Corporation, Animal Food Processing Plant.

HOUSING

No spectacular progress was made in the field of Housing in 1956. The year was rather one of consolidation and implementation of action begun in 1955. Following a general slowing down in the programme of Council house building some delay occurred in rehousing tenants from unfit houses, and at the end of the year eight tenants had been rehoused.

A small number of houses was represented as being unfit for habitation and action taken as follows:-

(a) Undertakings given by owners not to relet:-

- (1) Caravan The Glade, Walliswood (subsequently demolished)
- (2) Shack " " "
- (3) Madeley Bungalow "
- (4) Oakdene " (subsequently demolished)

(b) Undertakings to carry out work:

- (1) Violetta Cottage, The Grove, Horley.
- (2) 30, Albert Road, Horley.

(c) Demolition Order under Section 11 Housing Act, 1936

Axes Barn Cottage, Salfords.

(d) Closing Order under Section 10 Local Government (Misc. Provisions) Act, 1953

Elm Cottage, Charlwood

Housing Act, 1949. Improvement Grants

Under this Act the Council has a discretionary power to give grants up to a maximum of £400 or half of the cost of approved work towards the cost of "improving" dwellinghouses. The improvements usually include provision of bathroom water closets, water heating apparatus, installation of electricity or gas, and provision of new drainage.

Applications were approved in 1956 in respect of ninety-one dwellings, and the grants awarded totalled £17,136. 10s. 0d., an average grant of approximately £188 per cottage.

Thirty-four dwellings were owner/occupied and fifty-seven were tenanted. This is a considerable increase in the number of applications in respect of tenanted houses, and is largely accounted for by one application which was in respect of 27 dwellings at The Dene, Abinger Hammer.

Applications in respect of ten dwellings were refused for various reasons, such as, (i) commencement of work before consideration of application, (ii) work proposed not eligible for grant, (iii) cost of work below minimum financial limit.

In two cases where grants had been approved prior to 1956 the amount of grant was refunded, the amount involved being £337. 10s. 0d.

Housing (cont.)

Enquiries are sometimes received from Building Societies asking whether the Council would accept repayment of the grant if the Society were compelled to foreclose in respect of a grant-aided dwelling. This would have the effect of removing the obligation that the property be occupied by the owner receiving the grant, or let at the controlled rent. The Council has decided, as a matter of principle, to accept repayment of the grant in such cases.

PETROLEUM (CONSOLIDATION) ACT, 1928.

The department is responsible for the licensing and supervision of petroleum storage installations. By the above Act no persons may store petroleum spirit in excess of the quantity prescribed unless he holds a licence from the local authority.

In 1956 seventy-three such licences were issued in respect of which fees amounting to £53. 2s. 6d. were collected.

The increasing use of fuel oil for domestic heating and other purposes led the Public Health Committee to consider what advice could usefully be given to the users of such fuel. After due deliberation the Committee recommended that the suggestion of the Fire Offices Committee should be brought to the notice of users of oil burning installations. These suggestions are as follows:

OIL BURNING INSTALLATIONS

Suggestions for Safe Operation

1. Makers' instructions for the care and maintenance of Oil Burning Plant should be exhibited in a prominent place near the Plant,
2. MAKE SURE THAT Fuel Oil is of good quality having a certified flash-point not below 150°Fahr.
3. MAKE SURE THAT the installation and all equipment are regularly examined and report any defect to the installing or Oil Fuel Engineer,
4. MAKE SURE THAT all pipe lines, joints and fittings are oil tight. Leakage oil should not be allowed to accumulate, especially near the burners: drip trays are recommended but they should be emptied regularly.
5. MAKE SURE THAT the burners are cleaned regularly and that the blower, oil pump and other working parts are lubricated efficiently.
6. MAKE SURE THAT all stop cocks and fire valves are tested at least once a week.
7. MAKE SURE THAT the fire appliances are maintained in efficient working order and are always in easily accessible positions.
8. MAKE SURE THAT the electrical installation is efficiently maintained, especially having regard to the fact that the insulation may be subjected to high temperatures. Particular attention should be paid to the condition of any high tension leads, electrodes and electrode insulators. The maintenance of a correct spark gap is most important.

Oil Burning Installations (cont.)

9. MAKE SURE THAT oil strainers are cleaned regularly, and kept in an efficient condition.
10. MAKE SURE THAT sludge is removed frequently from the storage tank, if possible immediately before each fresh supply of oil is put into it.
11. MAKE SURE THAT "explosion doors" are never fastened, and kept in satisfactory working condition.
12. MAKE SURE THAT all flue dampers are fully open before lighting-up and also secured in such a way that they cannot be completely closed.
13. MAKE SURE THAT the ventilation of the boiler house is sufficient to ensure adequate air for combustion purposes.
14. MAKE SURE THAT flues are swept regularly and kept clean.
15. MAKE SURE THAT the installation is thoroughly examined, at least twice a year by a competent Oil Fuel Engineer, preferably before and after the winter season.
16. DON'T allow an unqualified person to tamper with or alter the adjustment of the combustion control or safety devices.
17. DON'T permit wood or other combustible materials to be deposited in the Boiler House.
Cleanliness in the Boiler House and Tank Chamber is essential.
18. DON'T attempt to light an automatic burner by hand in the event of failure of the automatic ignition device.

Prevention of Damage by Pests Act, 1949.

One operator is engaged on duties arising principally under this Act and made 971 visits of inspection and treatment. The following table shows the work carried out:-

	<u>Type of Property</u>				Agricul- tural
	<u>Non-Agricultural</u>				
	Local Authority	Dwelling Houses (including Council Houses)	All other (including Business Promises)	Total of Cols. 1, 2 and 3	
	1	2	3	4	5
1. Number of properties in Local Authority's District	16	8,683	374	9,073	260
2. Number of properties inspected as a result of:-					
Notification	5	158	55	218	12
Survey under the Act	11	60	80	151	47
Otherwise (e.g. when visited primarily for some other purpose	-	125	120	245	18
3. Total inspections carried out - including re-inspections	49	512	305	866	91
4. Number of properties inspected (in Sect. 2 found to be infested by:-					
- major	1	27	18	46	2
Rats - minor	10	130	20	160	12
major	-	22	12	34	-
Mice - minor	2	21	6	29	10
5. Number of infested properties (in Sect. 4 treated by the L.A.	12	164	41	217	17
6. Total treatments carried out - including re-treatments	35	486	41	562	33

Pet Animals Act, 1951

There are three establishments in the Council's area licensed under the Pet Animals Act, 1951, an Act designed to ensure that such premises are properly equipped for the purpose for which they are used.

